

Application Data Sheet

Application Information

Application number::	<u>10/576,506</u>
Filing Date::	April 18, 2006
Application Type::	Non-Provisional
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R??::	
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	GLYCOPEGYLATED FACTOR IX
Attorney Docket Number::	40853-5144-US1
Request for Early Publication::	No
Request for Non-Publication::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	27
Small Entity?::	Yes <u>No</u>
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers One::	
Secrecy Order in Parent Appl.::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Shawn
Middle Name::
Family Name:: DeFrees
Name Suffix::
City of Residence:: North Wales
State or Province of Residence:: PA
Country of Residence:: US
Street of Mailing Address:: 126 Filly Drive
City of Mailing Address:: North Wales
State or Province of mailing address:: PA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 19454

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Robert
Middle Name:: J.
Family Name:: Bayer
Name Suffix::
City of Residence:: San Diego
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 6105 Dirac Street
City of Mailing Address:: San Diego
State or Province of mailing address:: CA
Country of mailing address:: US

Postal or Zip Code of mailing address:: 92122

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Caryn
Middle Name::
Family Name:: Bowe
Name Suffix:: L.
City of Residence:: Doylestown
State or Province of Residence:: PA
Country of Residence:: US
Street of Mailing Address:: ~~276 Cherry Lane~~ 310 Maple Avenue
City of Mailing Address:: Doylestown
State or Province of mailing address:: PA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 18901

Applicant Authority Type:: Inventor
Primary Citizenship Country:: India
Status:: Full Capacity
Given Name:: Krishnasamy
Middle Name::
Family Name:: Panneerselvam
Name Suffix::
City of Residence:: Poway
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 14917 Morningside Dr.
City of Mailing Address:: Poway
State or Province of mailing address:: CA

Country of mailing address:: US
Postal or Zip Code of mailing address:: 92064

Correspondence Information

Correspondence Customer Number:: 043850

Representative Information

Representative Customer Number:: 043850

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Phase of	PCT/US2004/41070	12/03/04
PCT/US2004/41070	<i>An application claiming the benefit under 35 USC 119(e)</i>	60/527,089	12/03/03
PCT/US2004/41070	<i>An application claiming the benefit under 35 USC 119(e)</i>	60/539,387	01/26/04
PCT/US2004/41070	<i>An application claiming the benefit under 35 USC 119(e)</i>	60/592,744	07/29/04
PCT/US2004/41070	<i>An application claiming the benefit under 35 USC 119(e)</i>	60/614,518	09/29/04
PCT/US2004/41070	<i>An application claiming the benefit under 35 USC 119(e)</i>	60/623,387	10/29/04

Foreign Priority Information

Country::	Application number::	Filing Date::
WO	PCT/US2004/41070	December 3, 2004

Assignee Information

Assignee Name::
Street of mailing address::
City of mailing address::
State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address::